



2673X

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Jonathan Shneidman

Serial No: 09/258,601

Filed: February 26, 1999

For: TELESCREEN OPERATING METHOD

Art Unit: 2673

Examiner: Nitin Patel

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:
Commissioner for Patents
Washington D.C. 20231, on
December 19, 2001

Date of Deposit

Stuart Lubitz, Reg. No. 20,689

Name

December 19, 2001

Signature

Date

Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Transmitted herewith is a Response to Restriction Requirement and Preliminary Amendment in the above-identified application.

- ☐ Small entity status has been claimed. See 37 CFR § 1.27.
- ☐ A certified copy of ___ Patent Application No. ___ filed ___ from which priority is claimed under 35 U.S.C. § 119 is enclosed.
- ☒ Petition for Extension of Time (1-month)
- ☒ Associate Power of Attorney and Change of Correspondence Address.
- ☐ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	29	-	20 **	9	LG=\$18 SM=\$9	\$18	\$ 162
INDEPENDENT CLAIMS FEE	4	-	3 ***	1	LG=\$80 SM=\$40	\$80	\$ 30
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$270 SMALL ENTITY FEE = \$135		\$
TOTAL							\$ 242

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$ 0 to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$ 0 to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

Date: December 19, 2001

By: _____

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